

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

IA ETHICS AND  
CAMPAIGN DISCLOSURE

2009 SEP 24 AM 10:15

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Elect Phillip Sanchez

**IMPORTANT:** Indicate by # type of committee you are reporting for: 6  
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Phillip Sanchez Political Party (if applicable) \_\_\_\_\_

Office Sought Mason City City Council 4th Ward District (if Senate or House) \_\_\_\_\_

**FORM  
DR-2**

(Rev. 07/2007)

**DISCLOSURE  
REPORT**

**For Office Use Only**

Comm. # \_\_\_\_\_  
Logged In \_\_\_\_\_  
Scanned \_\_\_\_\_  
Computer \_\_\_\_\_  
Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Phillip Sanchez  
SIGNATURE OF PERSON FILING REPORT

641-424-6313  
TELEPHONE

9-20-09  
DATE SIGNED

I AM FILING A Disclosure REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election  
November 3, 2009

County & Local Committees, enter County in  
which Election is held  
Cerro Gordo County

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

1,125.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ \_\_\_\_\_

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

339.34

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) ..... \$ 785.66

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ \_\_\_\_\_

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ \_\_\_\_\_

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ \_\_\_\_\_

**CONSULTANT BREAKDOWN** (Schedule G Attached?) YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) ..... \$ \_\_\_\_\_

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Phillip Sanchez

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7-28-2009	ID# 6440 CK# 502	United Steelworkers Local #11-604 P.O. Box 1931, Mason City, IA 50401-1931		\$600.00	<input type="checkbox"/>
8-11-2009	ID# 9766 CK# 113	Laborer's Local #340 120 S. Main Street, Elkader, IA 52043		500.00	<input type="checkbox"/>
9-15-2009	ID# CK# 2718	Ken Kline 731 S. Monroe Ct, Mason City, IA 50401		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 1,125.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE

**B**

(Rev. 07/03)

MONETARY  
EXPENDITURESCHECK THIS BOX IF  
AMENDING FORM

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Elect Phillip Sanchez

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-24-2009	ID# 13831 CK# 059124	Dickey's Printing 308 E. 7th St., Waterloo, IA 50703	Cowboy Cards	\$ 165.85
9-14-2009	ID# 13831 CK# 060041	Best Buy 440 Indian Head Drive Mason City, IA 50401	Microsoft Office, Home and Student 2007	160.49
9-16-2009	ID# 13831 CK# 060082	Cerro Gordo County Auditor 220 North Washington Mason City, IA 50401-3254	Registered Voters in Ward #4, Disc	13.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 339.34

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)